## SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

	0						6	OF	36
(che	ck only one)								
X	11a		11b		11c		12		
	13		14		15		16	;	17

		atements may not be sold or used by any perso name and address of any political committee to				
	NAME OF COMMITTEE (In Full) American Health Care Association					
<u>/</u>	Full Name (Last, First, Middle Initial)					
۵.	Cynthia Andrews	Date of Receipt				
	Mailing Address 62 Shirley Street	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State Zip Code	Transaction ID : C3090194			
	Pepperell	MA 01463	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	250.00			
	Name of Employer	Occupation				
	Seven Hills Pediatric Center	Director of Nursing				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General	00 0				
_	Other (specify) ▼	250.00				
3.	Full Name (Last, First, Middle Initial) Vernon Baker		Date of Receipt			
	Mailing Address 1624 Thornridge Way		08 12 2015			
	City	State Zip Code	Transaction ID : C3070356			
	Charlottesville	VA 22911	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	250.00			
	Name of Employer	Occupation				
	Dogwood Village of Orange County	Administrator				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00				
— ).	Full Name (Last, First, Middle Initial) Brent Barraclough		Date of Receipt			
. •	Mailing Address 854 Highland View Loop	08 20 2015				
	City	State Zip Code	Transaction ID : C3077515			
	Redmond	OR 97756	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С	250.00			
	Name of Employer	Occupation				
	JDL, Inc.	Owner				
Receipt For:		Aggregate Year-to-Date ▼				
	Primary General Other (specify) ▼	250.00				
SI	UBTOTAL of Receipts This Page (optional)		750.00			
	OTAL This Period (last page this line number o	<u>`</u>				
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